Attorney Docket No..:030621



COMBINED DECLARATION / POWER OF ATTORNEY

AS BELOW NAMED INVENT	TOR, I HEREBY DECLARE	THAT: This Declaration is of the	following type:	
☑ Original☐ Continuation	☐ Supplemental	☐ Continuation-In-☐ National Stage o		sional
one name is listed below) or an	original, first and joint inven	d below next to my name: I believe tor (if plural names are listed below OKING A PRIVILEGED FUNCT	w) of the subject matter wh	ich is claimed and for
· ☐ was amended on (i	2003 as Serial No. 10/697, 35 f applicable). d in PCT International Applic		d as amended under PCT A	rticle 19 on
I hereby state that I have revie	wed and understand the conto I acknowledge the duty to	ents of the above-identified specification which is many		
certificate or of any PCT Intern have also identified below any	national application(s) designation for each for path for path of the United States of America	ited States Code, Sec. 119 of an ating at least one country other that tent or inventor's certificate or any filed by me on the same subject	in the United States of Ame PCT International applica	erica listed below and ation(s) designating at
			Prio	rity Claimed
(Country)	(Application No.)	(Day/Month/Year/File	d) (Yes)	(No)
(Serial No.)		(Filing Date)	_	
the claims of this application is	s not disclosed in the prior U ty to disclose material inform	nited States application(s) listed be fulled States application in the manation as defined in Title 37 CFR 1 ing date of this application:	nner provided by the first	paragraph of Title 35
(Serial No.)		(Filing Date)	- (Status)
U.S. Patent and Trademark Off	ice connected therewith. Plea	Customer No. 23696 to prosecute size direct all telephone calls to Phi epartment, 5775 Morehouse Drive	lip R. Wadsworth at (858)	651-4404 and address
believed to be true; and furthe	er that these statements were ment, or both, under Section 1	n knowledge are true and that all made with the knowledge that w 001 of Title 18 of the United State thereon.	rillful false statements and	the like so made are
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